CITY OF WILMINGTON APPLICATION FORM FOR WATER, SEWER, AND REFUSE REDUCTION

Section 11-2.2 of the Code of Ordinances of the City of Wilmington permits some single-family residents to receive a reduction on the rates for water, sewer, and refuse. To receive these reduced rates, the HOUSEHOLD must have a total gross income of \$20,500 or less AND either be 65 or older or be totally and permanently disabled. To be billed at the reduced rates, qualified residents must complete the information below and provide the following proof:

- 1. Age photocopy of driver's license or birth certificate
- 2. Income copy of claimant's and spouse's Social Security Administration form 1099 or 2458, most recent federal income tax form, or proof from New Hanover County that claimant is paying reduced County property taxes
- Disability certificate from a licensed physician stating that the claimant is totally and permanently disabled (required only if claimant is not 65 years of age)

This completed form, proof of income, proof of age, and disability certificate if applicable be sent to:
 City of Wilmington
 Solid Waste Management Division
 P.O. Box 1810
 Wilmington, NC 28402

	CLAIMANT	SPOUSE
FULL NAME		
RESIDENCE ADDRESS		
SOCIAL SECURITY NO.		
DATE OF BIRTH		
Enter the total income of	f claimant and spouse f	or the past year:
SOCIAL SECURITY BEN	EFITS	LIFE INSURANCE PROCEEDS
PENSION		DIVIDENDS
INTEREST INCOME		PROFITS FROM BUSINESS
ALL OTHER MONIES RE	CEIVED (SPECIFY)	
furnished by me in connects falsifying this application is	ion with this application is punishable as a felony un	est of my knowledge and belief, all information true and complete. I fully understand that deliberately der North Carolina law (N.C.G.S. 14-4) and would alue of the services received over and above what was
Claimant's Signature		Date
	FOR OFFIC	IAL USE ONLY
Account No.	Approved	Denied